ATTACHMENT 1.1-A STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

West Virginia State of————————————————————————————————————	
ATTORNEY GENERAL'S CERTIFICATION	
I certify that:	
The Bureau for Medical Services is the single Sta	te agency responsible for:
administering the plan.	
The legal authority under which the agency adn	ninisters the plan on a Statewide basis is
Chapter 9, Article 2, Section 1 Chapter 9, Article 2, Section 6(16) Chapter 5F, Article 1, Section 2(4) Chapter 5F, Article 2, Section 1(d)(2) (statutory citation)	
supervising the administration of the plan by l	ocal political subdivisions.
The legal authority under which the agency supe basis is contained in	ervises the administration of the plan on a Statewide
Chapter 9, Article 2, Section 5 Chapter 9, Article 2, Section 6(16) (statutory citation)	
The agency's legal authority to make rules and subdivisions administering the plan is	regulations that are binding on the political
Chapter 9, Article 2, Section 5 Chapter 9, Article 2, Section 6(16) (statutory citation) Date:	
Signature Title	
TN No. 95-06 Supersedes TN No. 94-05 Approval Date MAY 0 8 1935	Effective DateMAY 0 1 1995